-- PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

10711920

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		T	TYPE		OR	OR . SMALL ENTIT	
TOTAL CLAIMS			20					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		8	BASIC FEE	395.00	OR	Basic Fee	790.00
TC	TAL CHARGE	ABLE CLAIMS	20 minus 20=		•			X\$ 9=		OR	X\$18=	•
INDEPENDENT CLAIMS 3 minus								X44=		OR	X88=	
MULTIPLE DEPENDENT CLAIM PRESENT								+150=		OR	+300=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	790
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENTA	101304	CLAIMS		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	-2		=		X\$ 9=		OR	X\$18=	
	Independent	. 3	Minus	***	3	=		X44=		OR	X88=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			+150=		OR	+300=	/ .
TOTAL ADDIT. FEE											TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)		JUII. FEE S	•		ADD11. 1 CE1	•
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EST BER OUSLY	PRESENT EXTRA	1	RATE ,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	神		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***				X44=		OR	X88=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM		」	+150=	·	OR	+300=	
			•				L	TOTAL			TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	AD	DIT. FEE L			ADDIT. FEE	
AMENDMENT C	· ·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		.		X\$ 9= ·		OR	X\$18=	
ME	Independent	*	Minus	***		=		X44=		OR	X88=	. ·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												•
	•	no d io lang thou th	e entry in colu	Imp 2 write	"O" in col	. , , , , , , , , , , , , , , , , , , ,		150=		OR	+300 ≐	•
+ 11	ו ושל לשנט או נעניים	UU I id ibdd illan in	6 62 HIA DO FOR.						35			
** 11		nn i is less than th nber Previously Pa nber Previously Pa	id For IN THI	S SPACE is	less than	20, enter 720.	. AD	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE	